



# Commonwealth of Massachusetts

## The Building Official Certification Committee

### New Employee Report Form

s/bbrs/nureport2015\_3

In accordance with 780 CMR R7, the "Rules and Regulations for the Certification of Inspectors of Buildings, Building Commissioners and Local Inspectors", all municipalities are required to report to the Board the name of any individual who is appointed as a building code enforcement official. Once reported, a file is created at the Office of the Board with the individual's name and date of hire. This file serves as the individual's official record for the maintenance of his/her certification, once received.

It is the responsibility of the individual seeking certification and the hiring municipality to ensure that all aspects of the certification process are met. 780 CMR R7 defines all requirements of the certification program.

**Return To:** Department of Public Safety . Attn: Kimberly Spencer . 50 Maple Street ~ First Floor . Milford, MA 01757

**Or email to:** [Kimberly.spencer@state.ma.us](mailto:Kimberly.spencer@state.ma.us) **Or fax to:** 508-422-1954 **Questions:** 508-422-1962

Name of New Employee

Phone Number

Date of Appointment to current Position

Email

Municipality

Municipalities new employee still employed with

Bldg Dept Address

City/Town

Zip

Bldg Dept Phone Number

**Appointed Position:** \_\_\_\_ Inspector of Buildings ~ must have Local Certification, at the minimum

\_\_\_\_ Building Commissioner ~ must have Local Certification, at the minimum

\_\_\_\_ Local Inspector

New Employee Certified as a building code enforcement official? \_\_\_\_ yes \_\_\_\_ no

The appointing authority is the Mayor in a city and the Chairman of the Board of Selectmen in a town (see MGL c 143 § 3).

I \_\_\_\_\_, \_\_\_\_\_ the Appointing Authority,  
Name (please print) Title

hereby confirm that I have read and understand the minimum requirements of MGL c 143 § 3 regarding qualifications for building code enforcement officials. In signing this form, I attest to the fact that the candidate herein identified meets/exceeds such qualifications for the position for which he/she is being appointed.

Signature of Appointing Authority \_\_\_\_\_ Date \_\_\_\_\_

Notary Public \_\_\_\_\_ Date \_\_\_\_\_

Expiration of Commission \_\_\_\_\_ Seal \_\_\_\_\_

TO BE COMPLETED BY NEW EMPLOYEE ~ Conditional Inspector **NOT** already certified as a building code enforcement official

MA-RMV photo release signature: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SS#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
or CSL# \_\_\_\_\_

AUTHORIZATION FOR RELEASE OF RMV INFORMATION: My signature above, or a photocopy thereof, authorizes the Department of Public Safety to electronically access my photograph from the Massachusetts Registry of Motor Vehicles database for use on this application. Individuals who do not hold a Massachusetts drivers license please submit a color Passport Photo 2 x 2 inches in size taken within the past 6 months showing current appearance.

#### FOR OFFICE USE ONLY

Date Qualifications Accepted: \_\_\_\_\_ Date Qualifications Denied and Reason: \_\_\_\_\_